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AMENDMENT TRANSMITTAL LETTER		CLIENT-MATTER NO.: 66782-039 (P-AR 5585)	
SERIAL NO: 09/670,537	FILING DATE: September 27, 2000	EXAMINER: D. Jones	GROUP ART UNIT: 1616 CONFIRMATION NO.: 6771
INVENTION: DIAGNOSTIC PROBES AND THERAPEUTICS TARGETING UPA AND UPAR			

TO: COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, VA 22313-1450

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on August 18, 2003.

By: Melody E. Clark  
Melody E. Clark, Reg. No. 51,566

August 18, 2003  
Date of Signature

Transmitted herewith is response to the Restriction Requirement mailed June 18, 2003, in the above-identified application.

- Small Entity status of this application has been established under 37 CFR 1.27.
- Petition for Extension of Time is enclosed (in duplicate).
- Terminal Disclaimer with fee under 37 C.F.R. 1.20(d) is enclosed.
- No additional claims fee is required.
- An additional claims fee is required and has been calculated as shown below:

CLAIMS AS AMENDED

	NUMBER AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	NUMBER OF EXTRA CLAIMS PRESENTED	RATE		FEE	
				SMALL ENTITY	OTHER ENTITY	SMALL ENTITY	OTHER ENTITY
TOTAL CLAIMS	49	-	49	-	0	x \$9	\$18
INDEPENDENT CLAIMS	3	-	3	-	0	x \$42	\$84
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM		YES	X NO			\$140	\$280
						TOTAL ADDITIONAL FEE	\$0.00

- \* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in this space.
- \*\* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in this space.
- \*\*\* If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 0, write "0" in the space.

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- Please charge my Deposit Account No. 502624 the amount of \$55.00, which covers the fee for a one-month extension of time. A duplicate copy of this sheet is enclosed.
- The Commissioner is hereby authorized to charge payment of any fees associated with this communication or credit any overpayment to Deposit Account No. 502624. A duplicate copy of this sheet is enclosed.
- The Commissioner is hereby authorized to charge to Deposit Account No. 502624 any fees under 37 CFR 1.17 which may be required under 37 CFR 1.136(a)(3) for an extension of time in any concurrent or future reply requiring a petition for extension of time. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

Melody E. Clark

Melody E. Clark  
Registration No. 51,566  
McDERMOTT, WILL & EMERY  
4370 La Jolla Village Drive  
7<sup>th</sup> Floor  
San Diego, California 92122  
858-535-9001